

	U.S. Patent and	Approved for use throu Trademark Office; U.S. I	igh 09/30/2007 DEPARTMENT	OF COMMERCE				
Under the Paperwork Reduction Act of 1995, no persons are required	of information unless if displays a valid OMB control number.							
PETITION FOR EXTENSION OF TIME UNDER 3 FY 2006	Docket Number (Optional) 0142-0437P							
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)								
Application Number 10/717,605-Conf.	#8206	Filed November 21, 2003						
For SEGMENTING AN IMAGE VIA SHORTEST O	CYCLES							
Art Unit 2611		Examiner	N. J. Blo	om				
This is a request under the provisions of 37 CFR 1.13 identified application.								
The requested extension and fee are as follows (che	_			e below):				
One month (37 CFR 1.17(a)(1))	<u>Fee</u> \$120	Small Entity Fed \$60	≘ \$					
<u> </u>		\$225	\$ \$	450.00				
X Two months (37 CFR 1.17(a)(2))	\$450 \$1020		\$_ \$					
Three months (37 CFR 1.17(a)(3))	\$1020 \$4500	\$510 \$705	<b></b>					
Four months (37 CFR 1.17(a)(4))	\$1590	\$795	* _					
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$					
The Director is hereby authorized to charge a Deposit Account Number 02-2448  I am the applicant/inventor.		osed a duplicate co						
assignee of record of the entir	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).							
x attorney or agent of record. R	tegistration Numbe	r <u>40,953</u>						
attorney or agent under 37 CF	R 1.34.							
Registration number if acting un	nder 37 CFR 1.34		<del></del>					
	hist	Aug	ust 7, 2007					
Signature	( )	/700	Date					
Esther H. Chong (703) 205-8000  Typed or printed name Telephone Number								
NOTE: Signatures of all the inventors or assignees of record of the	entire interest or their repr	•						
than one signature is required, see below.								
Total of 1 forms are subm	nitted.							
		68/88/2987 JADDO	<del>1 - 0</del> 09 <del>00</del> 14	<del>,9 022448 - 107</del>				
201282 IANDO1 00000149 022448 10717	PAD	01, <del>FC: 120</del> 2	100.00 DA					
08/08/2007 JADDO1 00000149 622410 02 FC:1252 450.00 DA		w.g						

Complete if Known

PTO/SB/17 (07-07)

Approved for use through 06/30/2010. OMB 0651-0032

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		(8). Application Nu	Application Number 1		10/717,605-Conf. #8206				
FEE TRANSMITTAL		Filing Date	Filing Date N		November 21, 2003				
		First Named In	First Named Inventor		Henricus A MARQUERING				
For FY 2007		Examiner Name	Examiner Name N		N. J. Bloom				
Applicant claims small entity status. See 37 CFR 1.27		Art Unit	701 0/111		2611				
TOTAL AMOUNT OF PAYMENT	(\$) 550.00	Attorney Docke	t No.	0142-0437P					
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify):									
x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch,									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee									
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17									
FEE CALCULATION									
1. BASIC FILING, SEARCH, AND EXAMINATION FEES									
FIL	ING FEES Small Entity	SEARCH FEES Small Entity		NATION FEES Small Entity					
Application Type Fee (\$)	Fee (\$) Fe	e (\$) Fee (\$)	Fee (\$)		Fees Paid (\$)				
Utility 300	150 5	250	200	100					
Design 200	100 1	00 50	130	65					
Plant 200	100 3	150	160	80					
Reissue 300	-	500 250	600	300					
Provisional 200	100	0 0	0	0					
2. EXCESS CLAIM FEES					Fee (\$) Fee (\$)				
Fee Description Each claim over 20 (including Reissues)  50 25									
Each independent claim over 3 (including Reissues) 200 100									
Multiple dependent claims	,				360 180				
Total Claims Extra Claims	Fee (\$) F	ee Paid (\$)	N	Multiple Depende					
I ——	50.00 =	100.00							
HP = highest number of total claims paid for,	if greater than 20.								
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)									
HP = highest number of independent claims paid for, if greater than 3.									
3. APPLICATION SIZE FEE									
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets Extra Sheets		ch additional 50 or fra		of Fee (\$)	Fee Paid (\$)				
100 =	/50 =	(round <b>up</b> to a wh	ole number	) × =	•				
4. OTHER FEE(\$) Fees Paid (\$)									
Other (e.g., late filing surcharge): 1252 Extension for response within second month 450.00									
SUBMITTED BY		I = 1 : 2 : 2							
Signature	Chino	Registration No. (Attorney/Agent)	40,953	Telephone	(703) 205-8000				
Name (Print/Type) Esther H. Chong				Date	August 7, 2007				